Currently Amended Paragraphs of the Specification:

AFMF

Please amend paragraph [0003] to read as follows:

Commonly owned U.S. Patent Nos. 6,164,284, 6,208,894, and 6,315,721, each entitled "System of Implantable Devices For Monitoring and/or Affecting Body Parameters" and U.S. Patent No. 6,185,452 entitled "Battery Powered Patient Implantable Device", each incorporated herein by reference in their entirety, describe devices configured for implantation within a patient's body, i.e., beneath a patient's skin, for performing various functions including: (1) stimulation of body tissue and/or sensing of body parameters, and (2) communicating between implanted devices and devices external to a patient's body. Such implantable devices are preferably powered using rechargeable batteries and are programmed, e.g., via a programmer external to the patient's body. Once programmed, such devices are capable of operating "independently" according to their programmed parameters. However, it is not always convenient to use an external programmer due to cost, size, or availability constraints. Accordingly, a commonly assigned <u>U.S.</u> patent application <u>Ser. No. 10/080,881</u> entitled "Magnet Control System For Battery Powered Living Tissue Stimulators" has been concurrently filed along with this patent application, said application being incorporated by reference in its entirety herein. This copending patent application addresses this need by describing a programming system that can use a readily available, low cost, magnetic means or variations thereof, to program such implantable devices. It is also valuable to be able to selectively pause/stop the operation of such an implanted device, e.g., see U.S. Patent No. 6,101,417 to Vogel et al. which describes the capability to protect the operation of an implanted device from being evoked by an unexpectedly large magnetic field, e.g., resulting from an MRI device. The present invention improves upon such a capability by using an interlocking magnetic device, e.g., an electromagnet, that generates a string of magnetic pulses to evoke (or suppress) a response in the implantable device. By distinguishing the amplitude/duration/sequence of magnetic pulses, implanted devices can be selectively activated or deactivated.

Please amend paragraph [0044] to read as follows:

FIG. 5 is an exemplary block diagram showing the use of the system of the present invention to perform closed loop control of a body function. In block 352, the SCU 302 requests status from microsensor A (SE_A). The SCU 302, in block 354, then determines whether the present command given to a microstimulator is satisfactory and, if necessary, determines a new command and transmits the new command to the microstimulator A (ST_A) in block 356. For example, if microsensor A (SE_A) is reading a voltage corresponding to the degree of contraction resulting from stimulating a muscle, the SCU 302 could transmit a command to microstimulator A (ST_A) to adjust the sequence of drive pulses, e.g., in magnitude, duty cycle, etc., and accordingly change the voltage sensed by microsensor A (SE_A). Accordingly, closed loop, i.e., feedback, control is accomplished. The characteristics of the feedback (pesition proportional, integral, derivative (PID)) control are preferably program controlled by the SCU 302 according to the control program contained in program storage 310.

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Please amend paragraph [0068] (please note that [0069] is the corresponding paragraph number in the 18 month publication US 2003/0167078) to read as follows:

Combinations of timing and slider positions may be used. Patients with a poor sense of timing, may use position combinations as well. Typical examples include: 0 followed by A, 0 followed by B, A followed by 0, B followed 0, etc. In such programming combinations, the patient may need two hands. One: one to hold the magnet, the other to move the slider.